

Retail Food Establishment Inspection Report

Floyd County Health Department Telephone:812-948-4726

XUU0

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24. Indiana Retail Food Establishment Sanitation Requirements.

The time limit for correction of each violation is specified in the narrative portion of this report.

Establishment Name				I Telephone Number	Data of In	encetion I DI	CDAAYON O
		ł l	Vicks, 11c	Telephone Number	Date of Inspection (mm/dd/yr) PERMIT #		
			mber and street, city, state, zip code)	1	1/21	12020 19	- 294
			- · · · · · · · · · · · · · · · · · · ·	582 254 9113	'	` [<i>'</i>	
Owner	37000 27	-	Now Albany, IN 47150	Purpose:	Follow-u	p Release Da	
Michael				_ ^	·		
		ΠĻ		1. Routine	No 10 days		
Owner's A		1		Follow-up	Summary	of Violations:	
7301 K	Mr Ra	. (Suite 102) Lavisville, KT 40206	3. Complaint	l n	h	m
Person in C				4. Pre-Operational	$C \bigcirc NC \bigcirc R \bigcirc $		
Brad	<u>. </u>			5. Temporary			
Responsible	e Person's	E-ma	il	6. HACCP	Menu Tyj	oe (See back of p	age)
Certified F			4	7. Other (list)	12	3 <u>X_</u> 4_	5
Brad	Fair	<u>(1/</u>	8/23)				
• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"							
AND LATIONAS DEDECATED EDOM DEVIANG ANG DEVIANG A DE DEMOTED IN THE SCHAMA DV OF VIAN ANTANGE NA DE ANTANGE DE							
• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"							
Section#	C/NC	R	Narrative			To Be Corre	cted By
			No violations. All corrections me	_l.			
			THE VISIONISS. I THE CONTROLLINGS IN	nec.			
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Received by (name and title printed) Brad Fay				Inspected by (name and title printed): A.). Ingram (EHS)			
Received by (signature): Inspected by (signature):							
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cc:			ce:		cc;	-	
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